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**FEB 24 2005****DATE:** February 24, 2005**PTO IDENTIFIER:** Application Number 09/773257-Conf. #4326  
Patent Number**Inventor:** Athanassios TOLIS et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** LAHIVE & COCKFIELD, LLP  
Leigh J. Martinson**PHONE:** (617) 227-7400**Attorney Dkt. #:** FBT-002**PAGES (Including Cover Sheet):** 21**CONTENTS:**  
Fee Transmittal (1 page, in duplicate)  
Amendment Transmittal (1 page)  
Amendment in Response to Non-Final Office Action (14 pages)  
Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Change of Correspondence Address Form PTO/SB/122 (1 page)  
Certificate of Transmittal (1 page)  
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PTO/SB/97 (09-04)

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Application No. (if known): 09/773257

Attorney Docket No.: FBT-002

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on February 24, 2005  
Date



Signature

Leigh J. Martinson

Typed or printed name of person signing Certificate

50,749

Registration Number, if applicable

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Fee Transmittal (1 page, in duplicate)

Amendment Transmittal (1 page)

Amendment in Response to Non-Final Office Action (14 pages)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Change of Correspondence Address Form PTO/SB/122 (1 page)

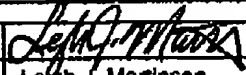
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PTO/SB/n7 (12-04v2)  
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|   |  |  |  |
|---|--|--|--|
| Effective on 12/03/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |  | <b>Complete If Known</b><br>Application Number <b>09/773257-Conf. #4326</b><br>Filing Date <b>January 31, 2001</b><br>First Named Inventor <b>Athanasios TOLIS</b><br>Examiner Name <b>J. A. Mooneyham</b><br>Art Unit <b>3629</b><br>Attorney Docket No. <b>FBT-002</b> |  |
| <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27   |  |  |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> <b>(\$)</b> <b>450.00</b>  |  |  |  |

|   |  |
|---|--|
| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify) _____<br><input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <b>12-0080</b> Deposit Account Name: <b>Lahive &amp; Cockfield, LLP</b><br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments |  |
|---|--|

| <b>FEE CALCULATION</b><br><b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |             |                       |             |                       |                  |                       |                             |
|---|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|-----------------------------|
| Application Type  | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$)              |
|   | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                             |
| Utility   | 300         | 150                   | 500         | 250                   | 200              | 100                   |                             |
| Design  | 200         | 100                   | 100         | 50                    | 130              | 65                    |                             |
| Plant   | 200         | 100                   | 300         | 150                   | 160              | 80                    |                             |
| Reissue   | 300         | 150                   | 500         | 250                   | 600              | 300                   |                             |
| Provisional   | 200         | 100                   | 0           | 0                     | 0                | 0                     |                             |
| <b>2. EXCESS CLAIM FEES</b>   |             |                       |             |                       |                  |                       |                             |
| Fee Description<br>Each claim over 20 (including Reissues)  |             |                       |             |                       |                  |                       | Small Entity Fee (\$)<br>25 |
| Each independent claim over 3 (including Reissues)  |             |                       |             |                       |                  |                       | 200                         |
| Multiple dependent claims   |             |                       |             |                       |                  |                       | 360                         |
| Total Claims <u>26</u> - 20 = <u>6</u> Extra Claims x <u>25</u> = <u>150</u> Fee (\$)<br>Fee Paid (\$)<br>Indep. Claims <u>2</u> - 3 = <u>-1</u> Extra Claims x <u>200</u> = <u>-200</u> Fee (\$)<br>Fee Paid (\$)<br>Multiple Dependent Claims Fee (\$)<br>Fee Paid (\$)<br><b>3. APPLICATION SIZE FEE</b><br>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)<br>Total Sheets <u>150</u> - 100 = <u>50</u> Extra Sheets / 50 = <u>1</u> Number of each additional 50 or fraction thereof (round up to a whole number) x <u>250</u> = <u>250</u> Fee (\$)<br>Fee Paid (\$)<br><b>4. OTHER FEE(S)</b><br>Non-English Specification, \$130 fee (no small entity discount)<br>Other (e.g., late filing surcharge): <u>1252</u> Extension for response within second month <u>450.00</u> |             |                       |             |                       |                  |                       |                             |

|   |  |  |  |
|---|--|--|--|
| <b>SUBMITTED BY</b><br>Signature <br>Name (Print/Type) <b>Leigh J. Martinson</b> |  | Registration No. <b>50,749</b><br>(Attorney/Agent) | Telephone <b>(617) 227-7400</b><br>Date <b>February 24, 2005</b> |
|---|--|--|--|

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Dated: February 24, 2005

Signature  (Leigh J. Martinson)

PTO/SB/17 (12-04/v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).

## FEE TRANSMITTAL

### For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

|                                |  |                    |                          |                       |
|--------------------------------|--|--------------------|--------------------------|-----------------------|
| <b>TOTAL AMOUNT OF PAYMENT</b> |  | <b>(\$) 450.00</b> | <b>Complete If Known</b> |                       |
|                                |  |                    | Application Number       | 09/773257-Conf. #4326 |
|                                |  |                    | Filing Date              | January 31, 2001      |
|                                |  |                    | First Named Inventor     | Athanasios TOLIS      |
|                                |  |                    | Examiner Name            | J. A. Mooneyham       |
|                                |  |                    | Art Unit                 | 3629                  |
|                                |  |                    | Attorney Docket No.      | FBT-002               |

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account      Deposit Account Number: 12-0080      Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below      ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17      ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Small Entity Fee (\$) | Small Entity Fee (\$) |
|--|-----------------------|-----------------------|
| Each claim over 20 (including Reissues)            | 50                    | 25                    |
| Each independent claim over 3 (including Reissues) | 200                   | 100                   |
| Multiple dependent claims                          | 360                   | 180                   |

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**      **Multiple Dependent Claims**

26      - 28 =      x      =      Fee (\$):      Fee Paid (\$):

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

2      - 3 =      x      =      Fee (\$):      Fee Paid (\$):

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

100      - 100 =      /50      (round up to a whole number) x      =      Fee Paid (\$):

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

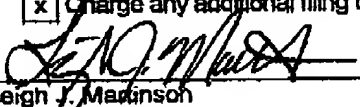

Other (e.g., late filing surcharge): 1252 Extension for response within second month      450.00

**SUBMITTED BY**

|  |  |                                  |
|--|--|----------------------------------|
| Signature: <u>Leigh J. Martinson</u>         | Registration No. (Attorney/Agent): <u>50,749</u> | Telephone: <u>(617) 227-7400</u> |
| Name (Print/Type): <u>Leigh J. Martinson</u> | Date: <u>February 24, 2005</u>                   |                                  |

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Dated: February 24, 2005      Signature: Leigh J. Martinson      (Leigh J. Martinson)

| <b>AMENDMENT TRANSMITTAL LETTER</b>  |                                  |                                 |                             | Docket No.<br>FBT-002           |        |
|--|----------------------------------|---------------------------------|-----------------------------|---------------------------------|--------|
| Application No.<br>09/773257-Conf. #4326   |                                  | Filing Date<br>January 31, 2001 |                             | Examiner<br>J. A. Mooneyham     |        |
| Art Unit<br>3629   |                                  |                                 |                             |                                 |        |
| Applicant(s): Athanassios TOLIS et al.   |                                  |                                 |                             |                                 |        |
| Invention: RESERVATION SYSTEM  |                                  |                                 |                             |                                 |        |
| <b>TO THE COMMISSIONER FOR PATENTS</b><br>Transmitted herewith is an amendment in the above-identified application.<br>The fee has been calculated and is transmitted as shown below.  |                                  |                                 |                             |                                 |        |
| <b>CLAIMS AS AMENDED</b>   |                                  |                                 |                             |                                 |        |
|  | Claims Remaining After Amendment | Highest Number Previously Paid  | Number Extra Claims Present | Rate                            |        |
| Total Claims   | 26                               | - 26 =                          | 0                           | x                               |        |
| Independent Claims   | 2                                | - 3 =                           | 0                           | x                               |        |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |                                 |                             |                                 |        |
| Other fee (please specify): Extension for response within second month   |                                  |                                 |                             |                                 | 450.00 |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>  |                                  |                                 |                             |                                 | 450.00 |
| <input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>  |                                  |                                 |                             |                                 |        |
| <input type="checkbox"/> No additional fee is required for this amendment.   |                                  |                                 |                             |                                 |        |
| <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-0080</u> in the amount of \$ <u>450.00</u> .<br>A duplicate copy of this sheet is enclosed.  |                                  |                                 |                             |                                 |        |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.  |                                  |                                 |                             |                                 |        |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                                  |                                 |                             |                                 |        |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u><br>as described below. A duplicate copy of this sheet is enclosed.   |                                  |                                 |                             |                                 |        |
| <input checked="" type="checkbox"/> Credit any overpayment.  |                                  |                                 |                             |                                 |        |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.   |                                  |                                 |                             |                                 |        |
| <br>Leigh J. Martinson<br>Attorney Reg. No.: 50,749<br><br>LAHIVE & COCKFIELD, LLP<br>28 State Street<br>Boston, Massachusetts 02109<br>(617) 227-7400  |                                  |                                 |                             | Dated: <u>February 24, 2005</u> |        |
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